

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	MC		8-30-01
O.I.P.E. CLASSIFIER		79	9/5/01
FORMALITY REVIEW	SA	261039	10/05/01
RESPONSE FORMALITY REVIEW	H-2	262	6/1/03-01

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 - (Through numeral) ... Canceled
 + Restricted
 N Non-elected
 I Interference
 A Appeal
 O Objected

Claim	Final	Original	Date
1	✓	✓	
2	✓	✓	
3	✓	✓	
4	✓	✓	
5	✓	✓	
6	✓	✓	
7	✓	✓	
8	✓	✓	
9	✓	✓	
10	✓	✓	
11	✓	✓	
12	✓	✓	
13	✓	✓	
14	✓	✓	
15	✓	✓	
16	✓	✓	
17	N	✓	
18	N	✓	
19	N	✓	
20	U	✓	
21	U	✓	
22	N	✓	
23	N	✓	
24	N	✓	
25	N	✓	
26	N	✓	
27	N	✓	
28	N	✓	
29	N	✓	
30	N	✓	
31	N	✓	
32	U	✓	
33	N	✓	
34	N	✓	
35	✓	✓	
36	✓	✓	
37	✓	✓	
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Claim	Final	Original	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
 staple additional sheet here

(LEFT INSIDE)

1-3-01
 1-3-01
 1-3-01